Case 3:08-cv-01454-MEJ Document 4 Filed 05/02/2008 Page 1 of 3

United States District Court

NORTHERN DISTRICT OF CALIFORNIA FILED

MAY 0 2 2008

SINGH

E-filing

RICHARD W. WIEKING SUMMONS IN ANAPAGE SEASE

CASE NUMBER:

V.

GONZALEZ

1054

TO: (Name and address of defendant)

EMILIO T. GONZALEZ, Director, U.S. Citizenship & Immigration Services, U. S Department of Homeland Security, Office of the Chief Counsel, 20 Massachusetts Avenue, N.W. Room 4025, Washington, DC 20536

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

JAMES CANFIELD. ATTORNEY AT LAW 1150 NORTH FIRST STREET, SUITE 219 **SAN JOSE, CA 95112**

an answer to the complaint which is herewith served upon you, within bu days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgement by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

Richard W. Wieking

CLERK

MAR 1 4 2008 DATE

MINEY THE BUCKLE

SAO 440 (Rev. 8/01) Summons in a Civil Action

TO THE (REV. 501) Sulfations in a Civil Action			
RETURN OF SERVICE			
Service of the Summons and complaint was made by me	DATE 4/18/2008		
NAME OF SERVER (PRINT) Mahesh Bajoria	TITLE		
Check one box below to indicate appropriate meth	nod of service		
☐ Served personally upon the defendant. Plac	e where served:		
☐ Left copies thereof at the defendant's dwelli discretion then residing therein.	ing house or usual place of abode with a person of suitable age and		
Name of person with whom the summons at	nd complaint were left:		
☐ Returned unexecuted:			
Other (specify): Served by certified mail with Return Ave. NW 4025, Washington, D.C. 20	Receipt on Emilio T Gonzalez, Director, USCIS, 20 Massachusetts 0529		
STATEMENT OF SERVICE FEES			
TRAVEL SERVICE:			
The state of the s	DECLARATION OF SERVER		
	Signature of Server 1150 North 1st Street, # 219, San Jose, CA 95112 Address of Server		

ነኒኒን	U.S. Postal Service TELL CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)			
7	For delivery information visit our website at www.usps.com			
5	USE USE			
257	Postage \$			
пі	Certified Fee /			
000	Return Receipt Fee (Endorsement Required)			
560 (Restricted Delivery Fee (Endorsement Required)			
256	Total Postage & Fees \$			
[~	Sent To Emilie T: Gonzalez, Brocelor Street, Apt. No.; U. S. C. I. S. or PO Box No. 20 Massachusetts Ave. Nix Prosing			
7007				
7				
city, State, ZIF+4 Washington D.C 20529				
	PS Form 3800, August 2006 See Religious Instructions			

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
1. Article Addressed to: Emilio T Genzalez Director USCIS	D. Is delivery address different from item 1?
LO Massachusetts Ave NW 4025 Washington Dc. 20529	Service Type Service Type
2. Article Number 7007 2560 (Transfer from service label)	0002:2575 1117
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540